

MULTIPLE DEPEN.  
CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. 101553898  
FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED						AFTER 1 <sup>ST</sup> AMENDMENT						AFTER 2 <sup>ND</sup> AMENDMENT							AS FILED						AFTER 1 <sup>ST</sup> AMENDMENT					
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TOTAL DEP.	7																			TOTAL DEP.											
TOTAL CLAIMS	8																			TOTAL CLAIMS											